2011 OCT 21 PM 2: 52 FEC MAIL CENTER

October 21, 2011

Federal Election Commission 999 E Street, NW Washington, DC 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in <u>SpeechNow v. FEC</u>, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Jason Miller Treasurer FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVED 7

2011 OCT 21 PM 2: 52

				FEG MAIL CENTER
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Concerned Taxp	ayers of Amer	rica		
ADDRESS (number and street)	10 E Street, SE			
(Check if address is changed)	Washington		DC	20003
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES  (Check if address is changed)	SS (Please provide only one jmiller@jamestownassoc	•		
COMMITTEE'S WEB PAGE ADD  (Check if address is changed)	ORESS (URL) www.concernedtaxpayers	.us		
2. DATE 10 21	2011.			
3. FEC IDENTIFICATION NU	JMBER <u>С</u>	C00488437		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined the Type or Print Name of Treasure	toon Millon	est of my knowledge and belie	f it is true, correct	and complete.
Signature of Treasurer  Jason A			Date 10	2011
NOTE: Submission of false, errone		on may subject the person signin	<del>-</del>	
Office Use		For further information Federal Election Comm Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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FEC Form 1 (Revised 02/2009)	Page 2			
TYPE OF COMMITTEE				
Candidate Committee:				
(a) This committee is a principal campaign committee. (Complete the candidate information below	v.)			
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Co information below.)	mplete the candidate			
Name of  Candidate				
Canadate				
Candidate Office Party Affiliation Sought: House Senate President	State 3			
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	CO. 1817			
Name of Candidate				
Party Committee:				
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Part			
Political Action Committee (PAC):				
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected organization is			
Corporation Corporation w/o Capital Stock	Labor Organization			
Name .	Cooperative			
In addition, this committee is a Lobbyist/Registrant PAC.				
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund committee. (i.e., nonconnected committee)				
In addition, this committee is a Lobbyist/Registrant PAC.				
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joint Fundraising Representative:				
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal eardidate				
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political			
Committees Participating in Joint Fundraiser				
·	national series of the series			
1.				
2.				
3.				
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Write or Type Committee Name						
Concerned Taxpayers of America						
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
N	ONE 					
L						
	Mailing Address					
		CITY STATE ZIP CODE				
	Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor				
7.	Custodian of Records: Iden books and records.	tify by name, address (phone number optional) and position of the person in possession of committee				
	Jason Mille	ur .				
	Full Name					
	Mailing Address	TO E Street, Se				
		Washington DC 20003				
	Title or Position	CITY STATE ZIP CODE				
	Treasurer	Telephone number 202 - 527 - 9930				
3.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and the name and address of ssistant treasurer).				
	Full Name Jason Mille of Treasurer	r 				
	Mailing Address	10 E Street, Se				
		Washington DC 20003 - CITY STATE ZIP CODE				
1	Title or Position Treasurer	Telephone number 202 - 527 - 9930				

Name of Bank, Depository, etc.

STATE

ZIP CODE

CITY

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No Postmark				
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Received from Electronic Filing Office	Date of Receipt			
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